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### Bib Data Sheet

**CONFIRMATION NO. 8857**

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|---|--|--|--|--|
| <b>SERIAL NUMBER</b><br>09/988,650  | <b>FILING DATE</b><br>11/20/2001   | <b>CLASS</b><br>345  | <b>GROUP ART UNIT</b><br><del>2673</del><br>2674 | <b>ATTORNEY DOCKET NO.</b><br>8733.536.00-US<br>(PATENT) |
| <b>APPLICANTS</b><br>Moo-Jong Lim, Residence Not Provided;<br>Hyung-Ki Hong, Residence Not Provided;  |  |  |  |  |
| <b>** CONTINUING DATA *****</b><br><div style="text-align: center;">No / HT</div>   |  |  |  |  |
| <b>** FOREIGN APPLICATIONS *****</b><br>REPUBLIC OF KOREA 2000-69054 11/20/2000 <div style="text-align: right;">Yes / HT</div>  |  |  |  |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 11/27/2001</b>  |  |  |  |  |
| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged<br><div style="display: flex; justify-content: space-between;"> <div>Examiner's Signature <u>HT</u></div> <div>Initials</div> </div> | <b>STATE OR COUNTRY</b>  | <b>SHEETS DRAWING</b><br>8   | <b>TOTAL CLAIMS</b><br>20                        | <b>INDEPENDENT CLAIMS</b><br>2                           |
| <b>ADDRESS</b><br>LONG ALDRIDGE & NORMAN LLP<br>Suite 600<br>701 Pennsylvania Avenue, N.W.<br>Washington, DC 20004 <div style="text-align: right; font-size: 2em; font-family: cursive;"># 30827</div>  |  |  |  |  |
| <b>TITLE</b><br>Method of color image display for a field sequential liquid crystal display device  |  |  |  |  |
| <b>FILING FEE RECEIVED</b><br>870   | <b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> All Fees       </div> <div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> 1.16 Fees ( Filing )       </div> <div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )       </div> <div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> 1.18 Fees ( Issue )       </div> <div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> Other _____       </div> <div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> Credit       </div> |  |  |